

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0016463

**DOCUMENT #** **N01000008622**

1. Entity Name  
**ACADIA ESTATES COMMUNITY OWNERS' ASSOCIATION, IN C.**



FILED

03 NOV 10 PM 2:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
**7836 W IRLO BRONSON HWY  
KISSIMMEE FL 34747**

Mailing Address  
**7836 W IRLO BRONSON HWY  
KISSIMMEE FL 34747**



2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

**REINSTATEMENT** *03*

4. FEI Number **APPLIED FOR** Applied For Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**CHEN, GEORGE  
7836 W IRLO BRONSON HWY  
KISSIMMEE FL 34747**

7. Name and Address of New Registered Agent  
Name **John Gigliotti**  
Street Address (P.O. Box Number is Not Acceptable) **c/o Liberty Development  
400 W. New England Ave Suite 9**  
City **Winter Park** FL Zip Code **32789**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *George Chen* DATE **7-12-03**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW: FEE IS \$61.25**  
**After September 10, 2003, min will be \$236.25**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

**Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	<b>D</b> <input type="checkbox"/> Delete
NAME	<b>CHEN, GEORGE</b>
STREET ADDRESS	<b>7836 W IRLO BRONSON HWY</b>
CITY-ST-ZIP	<b>KISSIMMEE FL 34747</b>
TITLE	<b>D</b> <input checked="" type="checkbox"/> Delete
NAME	<b>KERBER, MARY E</b>
STREET ADDRESS	<b>7836 W IRLO BRONSON HWY</b>
CITY-ST-ZIP	<b>KISSIMMEE FL 34747</b>
TITLE	<b>D</b> <input checked="" type="checkbox"/> Delete
NAME	<b>SALISBURY, JAMES</b>
STREET ADDRESS	<b>7836 W IRLO BRONSON HWY</b>
CITY-ST-ZIP	<b>KISSIMMEE FL 34747</b>
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<b>D</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>JOHN GIGLIOTTI</b>
STREET ADDRESS	<b>400 W. New England Ave. Suite 9</b>
CITY-ST-ZIP	<b>Winter Park, FL. 32789</b>
TITLE	<b>D</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Steve Trover</b>
STREET ADDRESS	<b>7822 W. IRLO BRONSON HWY.</b>
CITY-ST-ZIP	<b>Kissimmee, FL. 34747</b>
TITLE	<b>D</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Gwendolyn Laquardia</b>
STREET ADDRESS	<b>400 W. New England Ave. Suite 9</b>
CITY-ST-ZIP	<b>Winter Park, FL. 32789</b>
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *George Chen* **7-12-03** **407-397-1788**

SIGNATURE AND TYPE, OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (4/03)